

State of Connecticut  
Department of Public Health  
WIC Program



Guidelines for Clinicians Regarding WIC Special Formula Ordering

1. The earlier a mother and infant can be referred to the WIC Program, the better. This is especially true when dealing with women, infants or children requiring special formulas. WIC eligibility is based on income and nutritional need.
2. Effective October 1, 2011, the Connecticut WIC Program has a sole-source rebate contract with Mead Johnson for the standard infant formulas: **Enfamil PREMIUM Infant** and **Enfamil ProSobee**. For infants, **Enfamil PREMIUM Infant** and **Enfamil ProSobee** (powdered or liquid concentrate) do not require a prescription. However, if an infant needs **Enfamil ProSobee**, it may be better complete a **WIC Medical Documentation Form** to clarify the rationale for issuing a soy product.

Effective October 1, 2013, **Enfamil Gentlease** is approved as a Connecticut WIC standard contract formula not requiring a prescription. However, like all other cow's milk based formulas, this product should not be provided to anyone with a known or suspected milk allergy. Also, like other products containing lactose, this product is contraindicated when a totally lactose free diet is indicated. The Connecticut WIC Program no longer provides **non-contract** standard milk and soy based infant formulas. Issuance of medical formulas that are approved for use in the Connecticut WIC Program require a WIC Medical Documentation Form with an ICD code diagnosis, based on indications for usage, medical rationale and age appropriateness. The maximum amount of reconstituted oz. of infant formula at standard dilution that can be given to an infant depends on the age of the infant: 806 oz for 0-3m, 884 oz for 4-5m, and 624 oz for 6-11m.

3. Medically indicated enteral nutritional products for women or children also require a completed WIC Medical Documentation Form. The maximum amount of formula prescribed to a woman or child is 910 reconstituted oz per month (based on the product's standard dilution).
4. A Medical Doctor (MD), Advanced Practice Registered Nurse (APRN), or a Physician's Assistant (PA) who is authorized to write prescriptions can prescribe or request WIC special formulas. The medical documentation should include the patient's name, date of birth, medical rationale for the formula, the caloric density (e.g.; 24 cal/oz, 27 cal/oz), packaging (ready to feed, powder, etc.), length of issuance, and total volume per day (unless ad lib). It is useful to indicate any special instructions (e.g., if anything is to be added to the formula, special mixing instructions, etc.). The health care provider's signature should include his/her credentials (MD, APRN, or PA).
5. Some WIC Special Formulas can be obtained at retail grocery stores and pharmacies by the participants. Others may have to be ordered through the State (refer to the Connecticut WIC Program "Special Formula Approval List"). Special orders are shipped directly to the local WIC program.
6. Generally, allow ten days to two weeks from the time an individual applies to the WIC program until special order formulas are received by your patient or WIC participant. Shorter time frames can be accommodated, but aren't guaranteed. For this reason, it is advisable to have the infant/child's parent or guardian bring the **WIC certification form and WIC Medical Documentation Form** to the local WIC office at preferably two weeks (minimum one week) before hospital discharge when possible. The clinician should call the local WIC Program Nutritionist to inform her/him of how soon the client will be discharged. The health care provider can fax a prescription or WIC Medical Documentation Form to the local agency to facilitate the process. The local WIC Program Nutritionist will contact the State agency to place the order.